

#### Instructions For Filing Application For Exterior Elevation Changes

- 1. YOU ARE REQUIRED TO DISCUSS YOUR APPLICATION AND PLANS FOR EXTERIOR CHANGES APPROVAL WITH STAFF IN ORDER TO AVOID FILING AN INCOMPLETE APPLICATION. CALL THE CITY PLANNER AT (954) 746-3281 TO SCHEDULE AN APPOINTMENT AT LEAST 14 DAYS BEFORE THE SUBMITTAL DEADLINE. ALL APPLICATION FEES, INCLUDING POSTAGE/HANDLING (SEE CITY OF SUNRISE PLANNING AND DEVELOPMENT DEPARTMENT FEE SCHEDULE), MUST BE PAID AT THE TIME OF SUBMITTAL.
- 2. Application (12 copies) of Exterior Changes Approval form duly executed by owner.
- 3. Twelve (12) copies of the legal description/survey of the site.
- 4. Twelve (12) copies of plans drawn to scale, showing all the building facades, including color notation(s), and color chips identifying color changes.
- 5. Twelve (12) copies of a letter describing the request.
- 6. It is required that within a 500 ft. radius of the property line of the property which is the subject of this application, that all property owners shall be notified of said hearing. Therefore, the following is required of the applicant and must be presented at the time the application is filed:
  - a. A certified list of names and addresses of all property owners located within the aforementioned radius of the exterior boundary of the subject property. If the subject property constitutes only a portion of a contiguous ownership parcel, the exterior boundary from which the appropriate radius is to be projected will be the exterior boundary of the entire contiguous ownership parcel. All unit owners in a condominium must be notified.
  - b. One (1) typewritten set of gummed labels with the above names and addresses printed thereon. These labels will be used by the City to notify the public of your hearing.

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- c. The certified list may be obtained in one of the following two ways:
  - 1) The applicant may contract with any company listed below who will prepare the mailing list for a fee charged to the applicant. The City of Sunrise neither recommends nor endorses any of these companies, but is merely providing you with the names and phone numbers of those who are presently available to the City's knowledge. Fees may vary among these companies:

All Data Real Estate Systems	(954) 772-1800
Florida Real Estate Decisions	(954) 942-0344
Saltz Michaelson Architects	(954) 266-2700
Harmon Garrin Appraisals	(954) 587-5323
SSConsulting, LLC	(954) 786-5711

- Alternatively, the applicant may go to the Department of Public Information of the Broward County Property Appraiser at 115 South Andrews Avenue, Room 111, Fort Lauderdale. The office is open from 8:30 a.m. 5:00 p.m. Monday Friday, Phone # (954) 357-6830. With the provision of a folio ID number, their staff will assist you in the determination of the radius and furnish you with copies of the current tax roll. However, their staff will not certify the accuracy or completeness of the list. Therefore, the accurateness of the list provided to the City for mailing is done so at the owner/agent's risk and must be supplemented with the attached affidavit.
- 7. Sign on site: At least thirty (30) days prior to each scheduled hearing before the City Commission, the applicant must place upon the property a four foot by four foot (4' x 4') sign(s) facing each of the road rights-of-way on which the property fronts. If the property does not front on a road right-of-way, the sign(s) shall be placed on the property in such a manner as to give maximum exposure to the public. The sign(s) shall remain on the property until the final disposition of this application by the City Commission. The sign(s) shall be removed within seven (7) days thereafter. The sign(s) shall contain large lettering which shall be easily read by the public from the perimeter of the property, and said lettering shall indicate:
  - a) project name
  - b) type of project (use)
  - c) address, date & time of hearing City Commission meeting
  - d) phone number for information (954) 746-3281

This application includes an affidavit for the required posting of hearing notice signs on the site, which must be completed, signed, notarized and submitted to the

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City prior to the Planning and Zoning Board meeting. The applicant must also provide photograph(s) of the sign(s), signed and dated, and a copy of a plat or site plan indicating the location(s) of the required signage in reference to the subject site.

## FAILURE TO COMPLY WITH THIS REQUIREMENT WILL DELAY THE APPROVAL PROCESS.

- 8. Twelve (12) sets of photographs of the existing building(s).
- 9. Fees for filing, advertising and gummed labels must be paid at time of submittal. Please make checks payable to the City of Sunrise, in the amounts specified in the CITY OF SUNRISE PLANNING & DEVELOPMENT DEPARTMENT FEE SCHEDULE, a copy of which is attached.
- 10. Applicants must file their application according to the attached schedule. Applications must be approved by the Planning & Zoning Board and the City Commission. Your presence at all meetings is required.
- 11. When submitting packets to the City, please have the above items collated into individual sets in the following order:
  - Photographs
  - Letter Describing Request
  - Exterior Elevation Changes
  - Application Form
  - Affidavits/Owner's Sworn to Consent
  - Elevations & Color Chips

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## Planning and Development Department Application For Exterior Elevation Changes

Name of Business
Name of Applicant
Address
Contact:
Telephone NoFax No
Name of Property Owner
Address
Telephone No
Legal Description of Property Covered by this Application:
Is this hearing being requested as a result of a violation notice or summons? Yes No If yes, in whose name was the violation or summons notice served?
Nature of Violation
Zoning: Acres:

# **AFFIDAVIT OF OWNER OR AGENT Certification of Property List**

<u> </u>	(as the owner or the authorized
agent), for the property known as	
specifically located at	
recorded in theCounty	Public Records in Plat Book
	pose and say that I am the owner or agent of the
	tion for public hearing; that I have submitted or
<u> </u>	Owner List located within a 500 foot radius
	licable) of the subject application and that to the
best of my knowledge and belief said list	is true and accurate.
The list of the names and addresses	of all managery assumed leasted within the
	s of all property owners located within the oundary of the subject property is to be made a
	operty constitutes only a portion of a contiguous
	ry from which the appropriate radius is to be
* *	of the entire contiguous ownership parcel. All
. 5	that partially falls within the applicable radius
will be notified.	
	Print Name
State of,	
County of:	
Sworn and subscribed to before me, a No	ntary Public by
	, 20, who is either personally known to me
or who has produced	as identification.
1	<del></del>
My Commission Expires:	
	Notary Public for the State of Florida
	Print Name

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## AFFIDAVIT OF OWNER OR TENANT

I,	(	all owners	on deed /	all tenar	its on	lease	e), being
first duly sworn, depos	e and say that I ar	m the	owner	ter	ant (c	heck	one) of
the Property described	in the above appl	ication for	public hear	ring; tha	t all th	e an	swers to
the questions in this ap	plication, sketche	s, data, and	d other sup	plementa	ary ma	tter	attached
to and made a part of	this application, a	re honest	and true to	the best	of my	y kn	owledge
and belief. I understan	d this application	must be a	accurately of	complete	d befo	ore a	hearing
can be advertised. In	the event that I, o	or anyone	appearing of	on my b	ehalf,	am 1	found to
have made a material	misrepresentatio	n regardin	g this app	lication,	I un	derst	and the
application can be canc	elled, and any ex	terior eleva	tion chang	e grante	d can l	oe m	ade null
and void by the City, at	its sole option.						
	Prin	t Name:					
State of							
State of County of	······································						
Sworn and subscribed to be	fore me, a Notary Pub	olic, by			_, this		day of
		personally	known to	me or	who	has	produced
My Commission Expires:							
,		Notary 1	Public for the	State of _			
			Print Name:				

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## ATTORNEY AFFIDAVIT

I,, bei	ing first duly sworn, depose and say that I am ar
Attorney at Law, who is licensed to	practice in the State of Florida, who represents the
Owner of the property described ab	ove, and which is the subject matter of a proposed
·	er supplementary matter attached to and made a par
. •	true to the best of my knowledge and belief.
	be accurately completed before a hearing can be
* *	that any material misrepresentation made regarding
<del>_</del>	n, can cause this application to be cancelled, and any
	ay become voided by the City of Sunrise, at its sole
option.	ay become voiced by the only of Sumise, at its soil
spuon.	
	Signature
	-
State of,	
County of:	
Sworn and subscribed to before me, a	a Notary Public, by,
this day of 20	), who is either personally known to me or who
nas produced	as identification.
My Commission Expires:	
	Notary Public for the State of
	Print Name:

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## **CORPORATION AFFIDAVIT**

I,	, being first duly sworn, depose and say that I am the
President of	, being first duly sworn, depose and say that I am the, a corporation existing under the laws of and who is authorized by the corporation to file this
the State of,	and who is authorized by the corporation to file this
application for public hearing	; that all answers to the questions in said application,
sketches, data, and other sup	plementary matter attached to and made a part of the
application, are honest and tr	rue to the best of my knowledge and belief; that said
corporation is the owner	tenant of the property described herein and which is
the subject matter of the pro	oposed hearing. I understand this application must be
	hearing can be advertised. In the event that I, or anyone
appearing on behalf of the co	orporate applicant, am found to have made a material
	or written, regarding this application, it is understood that
	d, and any exterior elevation change granted may be made
null and void by the City of Sur	•
j j	, 1
	President's Signature (Corp. Seal)
ATTEST:	Secretary's Signature
	, ,
State of,	
County of:	
Swam and subsaribad to before	ama a Natary Dublia by
	e me, a Notary Public, by,
	20, who is either personally known to me or who
has produced	as identification.
My Commission Expires:	
-	Notary Public for the State of
	Print Name:

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#### **DISCLOSURE OF OWNERSHIP**

Please list below the name, address, and percentage of ownership of any owner of the real property that is the subject matter of this application. Include all parties who have a financial interest, either directly or indirectly, in the subject real property, including but not limited to, all shareholders, beneficiaries to a trust, partners to any partnership agreement, and members of an investment group involving local participation.

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## **OWNER'S SWORN CONSENT**

#### PERMITTING CONTRACT PURCHASER TO FILE FOR A HEARING

the owner of the Property described in the	being first duly sworn, depose and say that I am ne above application, which is the subject matter authorize, my n for a public hearing.
	Signature
State of, County of:	
Sworn and subscribed to before me, a Nothis day of 20has produced	otary Public, by, , who is either personally known to me or who as identification.
My Commission Expires:	Notary Public for the State of Print Name:

Note: Each owner of the Property must execute this form.

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## **OWNER'S SWORN CONSENT**

#### PERMITTING TENANT TO FILE FOR A HEARING

I,	, being first duly sworn, depose and say that I am
the owner of the Property describe	ed in the above application, which is the subject matter
of the proposed hearing, and do h	ereby authorize, my
tenant, to file this application for a	public hearing.
	Signature
	Signature
State of,	
County of:	
Sworn and subscribed to before me	e, a Notary Public, by,
	20, who is either personally known to me or who
has produced	
м с	
My Commission Expires:	Natara Dalalia fari da Carta af
	Notary Public for the State of
	Print Name:

Note: Each owner of the Property must execute this form.

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## Affidavit – Section 16-31(e)(7) Posted Notice

## SITE PLAN/MASTER PLAN

I,	, as the	owner	authorized agent (check one)
for the real property known	as		, located a
			, and legally described
as			_, as recorded in the Broward
			plicable), do hereby attest that l
			cated on the above referenced
			7) on, 20
•		•	ion hearing on the site plan
		the prop	osed project scheduled for
, 20_	·		
Signed:			
Signed.			
Print Na	me:		
		Owner	Authorized Agent
			k One)
		`	,
State of,			
County of:			
Sworn and subscribed to before			
this day of			
has produced	as i	dentification	1.
M. G			
My Commission Expires:	_	T . D 11	
		-	ic for the State of
	1	riiit ivaine:_	

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